PATENT APPLICATION TRANSMITTAL LETTER

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TO THE COMMISSIONER						
			COOF			
OF SHD. HEM						
for CELLULAR	NETWOR	sk syste	MAND METH	101		
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Enclosed are:						
U	sheets of drawing.					
an assignment of the	invention to					
a certified copy of a						
associate power of at			<u> </u>			pplication.
	= /	sh small entit	ty status under 37 CFR	? 1.9 an	d 1.27. —	
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FOR.	NO. FILED	NO. EXTRA	RATE FEE]	RATE	FEE
	MATERIAL PROPERTY.	7/69/04/75		<u>OR</u> ,		
BASIC FEE			5	<u>OR</u>		s
TOTAL CLAIMS 20	-20 -	. 0	xs = :385	<u>OR</u>	# \$ =	5 .
INDEP. CLAIMS	-3 -	. 0	×\$. x 5 0	OR	×\$ =	\$
MULTIPLE DEPENDENT CLAIM	PRESENT	0	+\$ = 3 0	<u>OR</u>	+\$ -	3
If the difference in col. 1 is less th			TOTAL . 385	OR	TOTAL	\$
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Please charge n	my Deposit Acc	ount No	in the amoun	at of \$		
A duplicate con	py of this shee	t is enclosed.				
A check in the	amount of \$	to cove	r the filing fee is encl	losed.		
			harge payment of the		na fage	
associated with	this communic	ation or credi	t any overpayment to	Deposit	Account	
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A'ny ad	ditional filing	fees required	under 37 CFR 1.16.			
Any pa	tent applicatio	n processing f	ees under 37 CFR 1.17			
The Commission	er is hereby au	thorized to ch	harge payment of the f	ollowin	g fees du	ring
the pendency of	this application	on or credit an	ny overpayment to Dep this sheet is enclosed.	osit Ac	count	
<u>_</u>			for presentation of ext	ra clain	n a_	
_			*** under 37 CFR 1.17.			
			or before mailing of t			
of Allo	wance, pursuan	t to 37 CFR 1.	311(b).	pe Nort	c ●	
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	Complete if Known			
•	Application Number			
FFF TO A NORSITTAL	Filing Date			
FEE TRANSMITTAL	First Named Inventor YUVAL BAFKAN			
	Group Art Unit			
	Examiner Name			
TOTAL AMOUNT OF PAYMENT (\$)	Attorney Docket Number			

METHOD OF PAYMENT (check one.	FEE CALCULATION (continued)				
1. The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:	3. ADDITIONAL FEES Large Entity Small Entity				
Account CREDIT CARD, SEE	Fee Fee Fee Fee Gode (\$) Gode (\$) -Fee Description 105 130 206 85 Surcharge - late filing fee or oath	Fee Paid			
Name THE ATTACHED FORK	127 50 227 25 Surcharge - late provisional filing fee or cover sheet.				
Charge Any Additional Fee Required Under 37 CFR 1.18 at the Making of the Notice of Allowance, 37 CFR 1.311(b)	139 130 139 130 Non-English specification 147 2,460 147 2,460 For filing a request for reexamination				
2. Payment Enclosed:	112 900' 112 900' Requesting publication of SIR prior to Examiner action				
Check Order Other	113 1,790° 113 1,790° Requesting publication of SIR after Examiner action				
FEE CALCULATION (less effective 10/01/96)	115 110 215 55 Extension for response within first month				
1. FILING FEE	116 390 216 195 Extension for response within second month				
Large Entity Small Entity	117 930 217 465 Extension for response within third month				
Fee Fee Fee Fee Description Fee Paid	118 1,470 218 735 Extension for response within fourth month				
Code (\$) Code (\$) 101 770 (201 385) Utility (ilim) (see	119 300 219 150 Notice of Appeal				
203	120 300 220 150 Filing a brief in support of an appeal				
	121 260 221 130 Request for onal hearing				
	138 1,470 138 1,470 Petition to institute a public use proceeding				
108 770 208 385 Reissue filing fee 114 150 214 75 Provisional filing fee	140 110 240 55 Petition to revive unavoidably abandoned application				
SUBTOTAL (1) (S) 385	141 1,290 241 645 Petition to revive unintentionally abandoned application				
2. CLAIMS Fee from Fee Paid	142 1,290 242 645 Utility issue fee (or ressue)				
Extra pelow Lea Laid	143 440 243 220 Design issue fee				
Total Claims 20 -20 = 0 X = 0	144 650 244 325 Ptant issue lee				
Clares X = O	122 130 122 130 Petitions to the Commissioner				
Multiple Dependent Claums OX = O	123 50 123 50 Petitions related to provisional applications				
Lacas Falls, 6 11 Falls	126 230 126 230 Submission of Information Disclosure Stmt				
Large Entity Small Entity Fee Fee Fee Fee Fee Description Code (\$) Code (\$)	581 40 581 40 Recording each patent assignment per- property (times number of properties)				
103 22 203 11 Claims in excess of 20 102 80 202 40 Independent claims in excess of 3	146 770 246 385 Filling a submission after final rejection (37 CFR 1.129(a))				
104 260 204 130 Multiple dependent claim					
109 80 209 40 Reissue independent claims over original patent	149 770 249 385 For each additional invention to be examined (37 CFR 1.129(b))				
110 22 210 11 Relsaue chams in excess of 20 and over original patent	Other fee (specify)				
SUBTOTAL (2) (S) O	SUBTOTAL (3) (\$)	0			

SUBMITTED B Typed or	Υ		 Complete (#	applicable)
Printed Name	YUVAL BARKAM		Reg. Number	
Signature	youal Barkan	Date	Deposit Account User ID	

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents.